

VOUCHER DIFFERENCE STATEMENT (TRAVEL)

BUREAU NAME AND ADDRESS

DATE

TRAVEL ORDER NUMBER

TRAVEL OR OTHER CLAIM PERIOD

PAYEE'S NAME AND ADDRESS *(Include ZIP Code)*

VENDOR REFERENCE

AMOUNT CLAIMED

\$

AMOUNT APPROVED

\$

AMOUNT DEDUCTED

\$

☐ THE AMOUNT DEDUCTED WAS WITHHELD FOR THE REASONS STATED BELOW. (This notice should accompany any reclaim for amount deducted. Explain clearly basis for reclaim.)

☐ Your voucher is returned unpaid for resubmission together with a copy of a Travel Order, Form CD-29, to support your claim (FTR, 301-52.4). If claim is for househunting or transfer of station, a copy of service agreement or verification of same is required (FTR, 302-2.13).

☐ The amount of \$ _____ is suspended for excess per diem. Per diem rate should have been \$ _____ per day instead of \$ _____. Refer to Federal Travel Regulations (FTR, 301-11.6).

☐ According to information shown on your voucher, your per diem rate should be \$ _____ and the number of days claimed should be _____. (FTR, 301-11.100). Adjustment amount \$ _____.

☐ Per diem rate for travel of 24 hours or less is \$ _____ when a night's lodging is not required. Per diem is not allowed for travel of 12 hours or less. (FTR, 301-11.102).

Adjustment: Days _____ Amount \$ _____ Dates _____

☐ Per diem has been suspended as claim for period of _____ should have been on an actual subsistence basis (FTR, 301-11.300). Adjustment amount \$ _____.

☐ Actual subsistence expenses are authorized for travel performed to or in _____. Please reclaim by itemizing on a daily basis all necessary subsistence expenses and support lodging costs with receipts. Claim must not exceed prescribed maximum daily rates. (FTR, 301-11.306).

Adjustment amount \$ _____.

☐ Other adjustment amounts \$ _____. See below.

☐ If reclaim is made, prepare an original supplemental or include in a subsequent regular Travel Voucher with proper explanation and a copy of this form CD-376 (FTR, 301-52.11).

☐ Other:

SIGNATURE

TITLE